

*Not Aired until  
8/14/08. Terminated  
Reg. 6-15-08.*

### EXECUTIVE LOBBYING SUPPLEMENTAL REGISTRATION FORM

564  
Executive Lobbying Registration  
No.

#### Instructions

- Print in ink or type.
- Complete form and return to Board of Ethics, 2415 Quail Dr., 3<sup>rd</sup> Floor, Bared Range LA 70808, or fax (225) 763-8753. For information or assistance, call (225) 763-8777 or (800) 842-6600. No fee is required.
- This form must be submitted within 5 days of any changes in your registration form or to add employees or those you represent. It must be submitted within 30 days of any termination of employment or representation.

FOR OFFICE USE ONLY  
Postmark Date: 8-9-08

*Term*

*OKV*

1. NAME Fitzgerald, Rick  
Last First MI

3071779

NAME CHANGE \_\_\_\_\_  
Last First NO

2. BUSINESS PHONE (321) 287-8724  
(Area Code) Phone Number

3. FAX PHONE \_\_\_\_\_

4. BUSINESS ADDRESS \_\_\_\_\_  
Street and No. City State Zip

MAILING ADDRESS \_\_\_\_\_  
Street and No. City State Zip

5. EMPLOYER Goldman Sachs & Co.

6. EMPLOYER'S ADDRESS \_\_\_\_\_  
Street and No. City State Zip

7. Have you ceased or terminated all lobbying activities requiring registration? Yes  No \_\_\_\_\_

8. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the clients or persons who pay you to lobby; and (e) the date of termination if applicable.

1) Name \_\_\_\_\_  
Address \_\_\_\_\_

**EXECUTIVE LOBBYING  
SUPPLEMENTAL REGISTRATION FORM**

Executive Lobbyist Registration No.

2) Name Rick Fitzgerald  
 Address 9602 Sloane Street Orlando, FL 32827  
 Business or purpose \_\_\_\_\_  
 New Representation  
 Does this person pay you? \_\_\_\_\_  
 If No, who pays you? \_\_\_\_\_  
 Terminated Representation as of June 13, 2008

3) Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Business or purpose \_\_\_\_\_  
 New Representation  
 Does this person pay you? \_\_\_\_\_  
 If No, who pays you? \_\_\_\_\_  
 Terminated Representation as of \_\_\_\_\_

**CERTIFICATION OF ACCURACY**

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Rick Fitzgerald  
 Signature of Lobbyist

